DIGEST

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Greene HB No. 150

Abstract: Requires that health insurance issuers recognize assignment of health insurance benefits to health care providers.

<u>Proposed law</u> provides that, notwithstanding any other provision of law to the contrary, an insured, beneficiary, subscriber, or enrollee shall have the right to assign in writing any benefits payable under health insurance coverage, including any legal or contractual rights flowing from such coverage, to a health care provider who files claims with a health insurance issuer for medical services provided to the insured, beneficiary, subscriber, or enrollee. Requires that a health insurance issuer recognize any such assignment of benefits to a health care provider and shall not include any language or provisions prohibiting any such assignment in any form, contract, policy, subscriber agreement, certificate of coverage, or other evidence of health insurance coverage. Further provides that any payment made only to the insured, beneficiary, subscriber, or enrollee rather than the health care provider after assignment of benefits has been made shall be considered unpaid.

<u>Proposed law</u> provides that an insurance contract, policy, subscriber agreement, certificate of coverage, or other evidence of health insurance coverage shall not prohibit, and claims forms shall provide an option for the payment of benefits directly to a licensed hospital, licensed ambulance provider, physician, dentist, or other health care provider who provided the medical services in accordance with the provisions such insurance contract, policy, subscriber agreement, certificate of coverage, or other evidence of health insurance coverage for care provided.

<u>Proposed law</u> defines a "health care provider" as either:

- (1) A physician or other health care practitioner licensed, certified, or registered to perform specified health care services consistent with state law, or other person who provided the services in accordance with the provision of the insurance contract, policy, subscriber agreement, certificate of coverage, or other evidence of health insurance coverage.
- (2) A facility or institution providing health care services, including but not limited to a hospital or other licensed inpatient center; ambulatory, surgical, or treatment center; skilled nursing facility; inpatient hospice facility; residential treatment center; diagnostic, laboratory, or imaging center; or rehabilitation or other therapeutic health setting.

<u>Proposed law</u> also defines the terms "health insurance coverage" and "health insurance issuer" for purposes of <u>proposed law</u>.

Effective upon signature of governor or lapse of time for gubernatorial action.

(Adds R.S. 22:1827)